

Central Valley Indian Health, Inc. - Tachi



Executive Summary

Summarizes the Site, Parking, Facility Size, Staff and Contract Health Dollars necessary for the Service Delivery Plan in 2015. Identifies the Direct Care Services Offered to include highlighting any new services. Identifies the communities and population served for each service. The second page of the Executive Summary documents the priority resource issues as identified through the Master Planning process.

Historical Utilization by Location of Encounter

Documents 3 years of RPMS and contract care workloads provided at the facility predominantly serving the Primary Care Service Area by product line and specialty.

Historical Utilization by Community of Residence

Documents 3 years of RPMS and contract care workloads provided to the user population of the Service Delivery Area by product line and specialty.

Market Assessment

Compares the Historical Workload to the Health System Planning software and to national averages of patient care utilization, projecting future workloads based upon the worst case of these three planning scenarios. Also documents the percentage of care that will require contracting due to acuity and the quantity of care that can potentially be served by the direct care system.

Service Delivery Plan

Recommended service delivery plan by product line based upon projected workload, key characteristics, patient classification and tribal and IHS input.

Resource Allocation

Quantifies the necessary space and key characteristics for the Service Delivery Plan and compares them against existing resources. Also tabulates necessary contract health dollars based on the delivery plan.

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Executive Summary



Armona, Avenal, Coalinga, Corcoran, Hanford, Kettlement City, Laton, Lemoore, Other Rurals, Riverdale, Wishon

R	Resource Summary								
	Existing	Need	%						
Total Gross Sq Mtrs (GSM)	296	1,410	21.0%						
IHS Supportable GSM	296	1,410	21.0%						
IHS Parking Spaces	12	49	24.4%						
IHS Site (Hectares)	1.0	1.2	81.6%						
Recurring IHS Positions vs RRM	7.5	29.9	25.1%						
IHS Supportable Space Staff	8.3	33.1	25.1%						
Contract Hith \$	147,257	3,455,204	4.3%						

Service Summary
Primary Care, including
Family Practice
Dental
Mental Health
Social Service
Public Health Nursing
Public Health Nutrition
CHR
WIC
Transportation
_

		Popul	lation Sur	nmary			
2003 User Pop	Pop 611 Growth Rate 46.6%					ser Pop	896
2015 by Age							
0-14	477	15-44	296	45-64	80	65+	43
		А	verage A	ge			
Service Area	20.6	Calif	ornia	26.7	U	SA	36.0
Ex	panded Se	ervice Area	a #1		2015 U	ser Pop	N/A
Services							
Services							
Communities							
Ex	panded Se	ervice Area	a #2		2015 U	ser Pop	N/A
Services							
Jei vices							
Communities		-					



Executive Summary

Service Area Description

The Central Valley Indian Health Center in Lemoore, serving the Primary Care Service Area Communities listed to the left, is located in the city of Lemoore, California approximately halfway 42 miles south of the Clovis clinic.

As part of the Central Valley Service Unit, it is a satellite clinic offering primary and dental care for Native Americans in Kings County. It sends most of its referral workload to Clovis. The closest alternative care options can be found at Hanford Community Hospital (Primary & Secondary Care) and Fresno Community Hospital (Tertiary Care). Nursing home care can be found at Hanford Nursing Home.

As noted in the Service Summary to the left, Tachi Clinic plans to operate as a 40 hour per week Health Center with complete primary care services and dental services. Additional services such as CHR, Diabetes, WIC and Transportation are also provided.

Facility Description

The Tachi Facility, is part of a permanent structure. The entire structure is approximately 296 SM, originally opened in 1999.

	Services & Resourcing Priorities
1	Increase contract care funding
2	Drop Medicare Part D
3	Add Parking Space
4	Add exam rooms in Primary Care
5	Increase property & supply space
6	Add Dental space
7	Add space for Diabetes Program
8	Increase space for CHR's
9	Add Central Sterile space
10	Increase Health Information Management FTE
11	Add Health Information Management space
12	Add Dental Providers
13	Increase Primary Care providers
14	Add Alcohol & Substance Abuse counselors
15	Add Quality Management FTE and space

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Executive Summary

	Services & Resourcing Priorities Continued
16	Add needed Contract Health Administrative space
17	Add Case management space
18	Add Case management FTE
19	Add Property & Supply FTE
20	Add Contract Health Personnel
21	
22	
23	
24	
25	

	Campus Infrastructure Priorities									
1		7								
2		8								
3		9								
4		10								
5		11								
6		12								

	Functional Deficiencies									
1	Inadequate record storage	7								
2	Inadequate storage space	8								
3		9								
4		10								
5		11								
6		12								

The California Area Health Services Master Plan Central Valley Indian Health, Inc. - Tachi



Historical Workloads by Location of Encounter - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	Direct or Tribal Health Care Contract Health Care							
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
		Provider \	isits Only			P	rovider Visits	Only	
Primary Care									
Family Practice	2,677	3,537	3,501	3,238	0	0	0	0	0.0%
Internal Medicine	0	0	0	0				0	0%
Pediatric	1	6	0	2	0	0	0	0	0.0%
Ob/Gyn	0	3	0	1	0	0	0	0	0.0%
Emergency Care									
Emergency/Urgent	0	0	0	0				0	0%
ER/Non-urgent	0	0	0	0				0	0%
Specialty Care									
Orthopedics	0	0	0	0	0	0	0	0	0%
Ophthalmology	0	0	0	0	0	0	0	0	0%
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Otolaryngology	0	0	0	0	0	0	0	0	0%
Cardiology	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0				0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Allergy				0				0	0%
Pulmonology				^				^	00/
Gerontology	_								_
Gastroenterology	No	o Provide	r Codes	within RP	MS Syste	m for the	se types	of Specia	alist
Rheumatology	1 4.	o i rovido	. 00000	WIGHT IXI	wie eyele		oo typoo	от оросте	anot.
Oncology	_								_
Pediatric-Genetics				0				0	0%
Traditional Healing	0	0	0	0				0	0%
Totals	2,678	3,546	3,501	3,242	0	0	0		0%
Direct & Tribal Care + Contract Care	2,678	3,546	3,501	3,242					

^{*} Provider Visits - Document visits to a Physician, Nurse Practitioner, Midwife, and or Physician Assistant.

Other Ambulatory Care Services

Dental Service Minutes	24,668	23,830	23,373	23,957				0	0.0%
Optometry Visits	0	0	0	0	0	0	0	0	0%
Podiatry Visits	0	0	0	0	0	0	0	0	0%
Dialysis Patients	0	0	0	0				0	0%
Audiology Visits	0	0	0	0	0	0	0	0	0%
Outpatient Behavioral				_					
Health									
Mental Health Visits	0	0	0	0				0	0%
Psychiatry	0	0	0	0	0	0	0	0	0%
Social Services Visits	0	0	0	0				0	0%
Alcohol & Substance Abuse Visits	0	0	0	0				0	0%
BH Visit Totals	0	0	0	0	0	0	0	0	0%



Historical Workloads by Location of Encounter - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

		irect or Trib	al Health Ca	are	Contract Health Care				
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
Inpatient Care									
Labor & Delivery Births	0	0	0	0	0	0	0	0	0%
Obstetrics Patient Days	0	0	0	0	0	0	0	0	0%
Neonatology Patient Days	0	0	0	0	0	0	0	0	0%
Pediatric Patient Days	0	0	0	0	0	0	0	0	0%
Adult Medical Patient Days									
Cardiology	0	0	0	0	0	0	0	0	0%
Endocrinology	0	0	0	0	0	0	0	0	0%
Gastroenterology	0	0	0	0	0	0	0	0	0%
General Medicine	0	0	0	0	0	0	0	0	0%
Hematology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Oncology	0	0	0	0	0	0	0	0	0%
Pulmonary	0	0	0	0	0	0	0	0	0%
Rheumatology	0	0	0	0	0	0	0	0	0%
Unknown	0	0	0	0	0	0	0	0	0%
Medical Patient Day Total	0	0	0	0	0	0	0	0	0%
Adult Surgical Patient Days									
Dentistry	0	0	0	0	0	0	0	0	0%
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Gynecology	0	0	0	0	0	0	0	0	0%
Neurosurgery	0	0	0	0	0	0	0	0	0%
Ophthalmology	0	0	0	0	0	0	0	0	0%
Orthopedics	0	0	0	0	0	0	0	0	0%
Otolaryngology	0	0	0	0	0	0	0	0	0%
Thoracic Surgery	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0	0	0	0	0	0%
Vascular Surgery	0	0	0	0	0	0	0	0	0%
Surgical Patient Day Total	0	0	0	0	0	0	0	0	0%
Psychiatry Patient Days	0	0	0	0	0	0	0	0	0%
Medical Detox Patient Days	0	0	0	0	0	0	0	0	0%
Sub Acute/Transitional Care	0	0	0	0				0	0%
Inpatient Care Totals	0	0	0	0	0	0	0	0	0%
Direct & Tribal + Contract Care	0	0	0	0					
Substance Abuse Non- Acute	e Care								
Adult Residential Treatment	0	0	0	0				0	0%
Adol. Residential Treatment	0	0	0	0				0	0%
SA Transitional Care	0	0	0	0				0	0%
Substance Abuse Totals	0	0	0	0	0	0	0	0	0%
Elder Care									
Skilled Nursing Patients	0	0	0	0				0	0%
Assisted Living Patients	0	0	0	0				0	0%
Hospice Patients	0	0	0	0				0	0%
Nursing Home Totals	0	0	0	0	0	0	0	0	0%
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Historical Workloads by Location of Encounter - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	irect or Trib	al Health Ca	re	Contract Health Care				
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
Ancillary Services									
Lab Billable Tests	2,150	2,200	2,250	2,200				0	0.0%
Pharmacy Scripts	0	0	0	0				0	0%
Acute Dialysis Procedures	0	0	0	0				0	0%
Radiographic Exams	0	0	0	0	0	0	0	0	0%
Ultrasound Exams	0	0	0	0				0	0%
Mammography Exams	0	0	0	0				0	0%
Fluoroscopy Exams	0	0	0	0				0	0%
CT Exams	0	0	0	0				0	0%
MRI Exams	0	0	0	0				0	0%
Nuclear Medicine Exams	0	0	0	0				0	0%
Rad. Oncology Treatments	0	0	0	0				0	0%
Chemotherapy Treatments	0	0	0	0				0	0%
Physical Therapy Visits	0	0	0	0				0	0%
Occupational Therapy Visits	0	0	0	0				0	0%
Speech Therapy Visits	0	0	0	0				0	0%
Respiratory Therapy	0	0	0	0				0	0%
Cardiac Catheterization	0	0	0	0				0	0%
Home Health Care Patients	0	0	0	0				0	0%
Minor Procedure Cases									
Endoscopy	0	0	0	0	0	0	0	0	0%
Outpatient Surgery Cases									
Cardiovascular	0	0	0	0	0	0	0	0	0%
Digestive	0	0	0	0	0	0	0	0	0%
Endocrine	0	0	0	0	0	0	0	0	0%
ENT	0	0	0	0	0	0	0	0	0%
Gynecology	0	0	0	0	0	0	0	0	0%
Hemic and Lymphatic	0	0	0	0	0	0	0	0	0%
Integument	0	0	0	0	0	0	0	0	0%
Musculoskeletal	0	0	0	0	0	0	0	0	0%
Nervous	0	0	0	0	0	0	0	0	0%
Ocular	0	0	0	0	0	0	0	0	0%
Respiratory	0	0	0	0	0	0	0	0	0%
Urogenital	0	0	0	0	0	0	0	0	0%
OP Surgical Case Total	0	0	0	0	0	0	0	0	0%
Inpatient Surgery Cases	0	0	0	0	0	0	0	0	0%
Surgical Case Total	0	0	0	0	0	0	0	0	0%
Direct & Tribal + Contract Care	0	0	0	0					
EMS - Pre-Hospital Resp.	0	0	0	0				0	0%
EMS - Inter Hospital Resp	0	0	0	0				0	0%

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Historical Workloads by Community of Residence - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	irect or Trib	al Health Ca	ıre	Contract Health Care				
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
		Provider \	isits Only	•		Р	rovider Visits	Only	1
Primary Care									
Family Practice	1,233	1,648	1,846	1,576	0	0	0	0	0.0%
Internal Medicine	0	0	0	0				0	0%
Pediatric	6	4	8	6	0	0	0	0	0.0%
Ob/Gyn	0	0	1	0	0	0	0	0	0.0%
Emergency Care									
Emergency/Urgent	0	0	0	0				0	0%
ER/Non-urgent	0	0	0	0				0	0%
Specialty Care									
Orthopedics	0	0	0	0	0	0	0	0	0%
Ophthalmology	0	0	0	0	0	0	0	0	0%
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Otolaryngology	0	0	0	0	0	0	0	0	0%
Cardiology	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0				0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Allergy				0				0	0%
Pulmonology				^	_			^	00/
Gerontology									
Gastroenterology	No	o Provide	r Codes	within RP	MS Syste	m for the	se types	of Specia	alist.
Rheumatology					,		,		
Oncology				_	_				
Pediatric-Genetics				0				0	0%
Traditional Healing	0	0	0	0				0	0%
Totals	1,239	1,652	1,855	1,582	0	0	0		0%
Direct & Tribal Care + Contract Care	1,239	1,652	1,855	1,582					

^{*} Provider Visits - Document visits to a Physician, Nurse Practitioner, Midwife, and or Physician Assistant.

Other Ambulatory Care Services

Dental Service Minutes	24,668	23,830	23,373	23,957				0	0.0%
Optometry Visits	41	70	17	43	2	7	1	3	7.2%
Podiatry Visits	1	6	5	4	0	0	0	0	0.0%
Dialysis Patients	0	0	0	0				0	0%
Audiology Visits	0	0	0	0	2	4	2	3	100.0%
Outpatient Behavioral				_					_
Health									
Mental Health Visits	0	0	0	0				0	0%
Psychiatry	0	0	0	0	0	0	0	0	0%
Social Services Visits	0	0	0	0				0	0%
Alcohol & Substance Abuse Visits	0	0	0	0				0	0%
BH Visit Totals	0	0	0	0	0	0	0	0	0%

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Historical Workloads by Community of Residence - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

		Direct or Trib	al Health Ca	are	Contract Health Care						
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care		
Inpatient Care											
Labor & Delivery Births	0	0	0	0	0	0	0	0	0%		
Obstetrics Patient Days	0	0	0	0	0	0	0	0	0%		
Neonatology Patient Days	0	0	0	0	0	0	0	0	0%		
Pediatric Patient Days	0	0	0	0	0	0	0	0	0%		
Adult Medical Patient Days											
Cardiology	0	0	0	0	0	0	0	0	0%		
Endocrinology	0	0	0	0	0	0	0	0	0%		
Gastroenterology	0	0	0	0	0	0	0	0	0%		
General Medicine	0	0	0	0	0	0	0	0	0%		
Hematology	0	0	0	0	0	0	0	0	0%		
Nephrology	0	0	0	0	0	0	0	0	0%		
Neurology	0	0	0	0	0	0	0	0	0%		
Oncology	0	0	0	0	0	0	0	0	0%		
Pulmonary	0	0	0	0	0	0	0	0	0%		
Rheumatology	0	0	0	0	0	0	0	0	0%		
Unknown	0	0	0	0	0	0	0	0	0%		
Medical Patient Day Total	0	0	0	0	0	0	0	0	0%		
Adult Surgical Patient Days											
Dentistry	0	0	0	0	0	0	0	0	0%		
Dermatology	0	0	0	0	0	0	0	0	0%		
General Surgery	0	0	0	0	0	0	0	0	0%		
Gynecology	0	0	0	0	0	0	0	0	0%		
Neurosurgery	0	0	0	0	0	0	0	0	0%		
Ophthalmology	0	0	0	0	0	0	0	0	0%		
Orthopedics	0	0	0	0	0	0	0	0	0%		
Otolaryngology	0	0	0	0	0	0	0	0	0%		
Thoracic Surgery	0	0	0	0	0	0	0	0	0%		
Urology	0	0	0	0	0	0	0	0	0%		
Vascular Surgery	0	0	0	0	0	0	0	0	0%		
Surgical Patient Day Total	0	0	0	0	0	0	0	0	0%		
Psychiatry Patient Days	0	0	0	0	0	0	0	0	0%		
Medical Detox Patient Days	0	0	0	0	0	0	0	0	0%		
Sub Acute/Transitional Care	0	0	0	0				0	0%		
Inpatient Care Totals	0	0	0	0	0	0	0	0	0%		
Direct & Tribal + Contract Care	0	0	0	0							
Substance Abuse Non- Acute	Care										
Adult Residential Treatment	0	0	0	0				0	0%		
Adol. Residential Treatment	0	0	0	0				0	0%		
SA Transitional Care	0	0	0	0				0	0%		
Substance Abuse Totals	0	0	0	0	0	0	0	0	0%		
Elder Care											
Skilled Nursing Patients	0	0	0	0				0	0%		
Assisted Living Patients	0	0	0	0				0	0%		
Hospice Patients	0	0	0	0				0	0%		
Nursing Home Totals	0	0	0	0	0	0	0	0	0%		

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Historical Workloads by Community of Residence - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	Direct or Tribal Health Care				Contract Health Care					
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care	
Ancillary Services										
Lab Billable Tests	2,150	2,200	2,250	2,200				0	0.0%	
Pharmacy Scripts	0	0	0	0				0	0%	
Acute Dialysis Procedures	0	0	0	0				0	0%	
Radiographic Exams	0	0	0	0	0	121	200	107	100.0%	
Ultrasound Exams	0	0	0	0	ŭ		_00	0	0%	
Mammography Exams	0	0	0	0				0	0%	
Fluoroscopy Exams	0	0	0	Ö				0	0%	
CT Exams	0	0	0	0				0	0%	
MRI Exams	0	0	0	0				0	0%	
Nuclear Medicine Exams	0	0	0	0				0	0%	
Rad. Oncology Treatments	0	0	0	0				0	0%	
Chemotherapy Treatments	0	0	0	0				0	0%	
Physical Therapy Visits	0	0	0	0				0	0%	
Occupational Therapy Visits	0	0	0	0				0	0%	
Speech Therapy Visits	0	0	0	0				0	0%	
Respiratory Therapy	0	0	0	0				0	0%	
Cardiac Catheterization	0	0	0	0				0	0%	
Home Health Care Patients	0	0	0	0				0	0%	
Minor Procedure Cases										
Endoscopy	0	0	0	0	0	0	0	0	0%	
Outpatient Surgery Cases										
Cardiovascular	0	0	0	0	0	0	0	0	0%	
Digestive	0	0	0	0	0	0	0	0	0%	
Endocrine	0	0	0	0	0	0	0	0	0%	
ENT	0	0	0	0	0	0	0	0	0%	
Gynecology	0	0	0	0	0	0	0	0	0%	
Hemic and Lymphatic	0	0	0	0	0	0	0	0	0%	
Integument	0	0	0	0	0	0	0	0	0%	
Musculoskeletal	0	0	0	0	0	0	0	0	0%	
Nervous	0	0	0	0	0	0	0	0	0%	
Ocular	0	0	0	0	0	0	0	0	0%	
Respiratory	0	0	0	0	0	0	0	0	0%	
Urogenital	0	0	0	0	0	0	0	0	0%	
OP Surgical Case Total	0	0	0	0	0	0	0	0	0%	
Inpatient Surgery Cases	0	0	0	0	0	0	0	0	0%	
Surgical Case Total	0	0	0	0	0	0	0	0	0%	
Direct & Tribal + Contract Care	0	0	0	0						
EMC Dro Hoopital Boss	0	0	0	0				0	00/	
EMS - Pre-Hospital Resp.	0	0	0	0				0	0%	
EMS - Inter Hospital Resp	0	0	0	0				0	0%	



Market Assessment - Native American

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2003			2015		2015 P	anning Assu	umption	
HSP User Pop PSA		611			896					
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care	
Drimony cons	Pro	vider Visits Or	nly	Pro	ovider Visits Or	nly	Provider Visits Only			
Primary care	1 F7C	F07		2 244	057		2.250	2.250	0	
Family Practice Internal Medicine	1,576	587 182		2,311	857 262	Cell = Sub-Total	2,259 262	2,259 262	0	
Pediatric	0 6	522		0 9	772	less PC	772	772	0 0	
Ob/Gyn	0	179		0	262	Specialties	262	262	0	
Urgent Care Clinic	0	173		0	202		0	0	0	
Primary Care Sub-Tot.	1,582	1,470	2,433	2,320	2,153	3,555	3,555	3,555	0	
Emergency Care										
Emergency/Urgent	0	139		0	203	Cell = Sub-Total	203	203	0	
ER/Non-urgent		92			135	less E/U	▶ 195	195	0	
Emerg. Care Sub-Tot.	0	231	272	0	339	398	398	398	0	
Specialty Care										
Orthopedics	0	89		0	130		130	130	0	
Ophthalmology	0	63		0	90		90	90	0	
Dermatology	0	69		0	101		101	101	0	
General Surgery	0	71		0	103		103	103	0	
Otolaryngology	0	51		0	74		74	74	0	
Cardiology	0	16		0	23		23	23	0	
Urology	0	22		0	32		32	32	0	
Neurology	0	19		0	27		27	27	0	
Other Specialties		141		0	204		124	124	0	
Nephrology	0	Unknown		0	Unknown		0	0	0	
Allergy	0	19		0	28		28	28	0	
Pulmonology	0	8		0	12		12	12	0	
Gerontology	0	Unknown		0	Unknown		0	0	0	
Gastroenterology	0	16		0	23		23	23	0	
Rheumatology Oncology	0 0	Unknown 12		0 0	Unknown 17		0 17	0 17	0 0	
Pediatric-Genetics	0	Unknown		0	Unknown		0	0	0	
Traditional Healing	0	Unknown		0	Unknown		0	0	0	
Specialty Care Sub-Tot.	0	597	79	0	865	123	785	785	0	
Total Provider Visits By	0	331	13		000	120	700	700	0	
PSA Residents	1,582	2,297	2,784	2,320	3,357	4,075	4,738	4,738	0	
Provider Visits	Unmet	-1,202	Over Utilization	nn if (+)						
i lovider visits	need if (-)	-1,202	Over ounzauc	/// (<i>'</i>)						
Total Provider Patient	2.59	3.76	4.56	The rate is the User Po		y dividing the	Total Provide	er Visits from th	e PSA by	
Utilization Rate Other Ambulatory Care				000111						
Services										
Dental Service Minutes	23,957	53,971	58,064	35,132	79,124	85,102	85,102	85,102	0	
Optometry Visits	46	Unknown	179	67	Unknown	265	265	265	0	
Podiatry Visits	4	77		6	109		109	109	0	
Dialysis Patients	0	Unknown	7-	0	Unknown	440	0	0	0	
Audiology Visits	3	111	75	4	162	116	162	162	0	
Outpatient Behavioral Health		I I a I a	70	2	I I a I a	400	400	400		
Mental Health Visits	0	Unknown	76	0	Unknown	109	109	109	0	
Psychiatry Social Services Visits	0	46		0	67		67	67	0	
Alcohol & Substance Abuse	0	Unknown Unknown		0	Unknown Unknown		0	0	0	
BH Visits Totals	0	46	76	0	67	109	176	176	0	
DIT VISILS TUTAIS	U	40	70	U	UI	109	170	170	U	

The California Area Health Services Master Plan Central Valley Indian Health, Inc. - Tachi



Market Assessment - Native American

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2003			2015		2015 PI	anning Assı	umption
HSP User Pop PSA		611			896		201011	anning Asse	amption
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
Innations Cons	Provi	der Visits O	nly	Pro	vider Visits On	ly	Р	rovider Visits Or	nly
Inpatient Care	0	12	40	0	10	58	58	48	10
Labor & Delivery Births Obstetrics Patient Days	0	18	40 85	0 0	18 26	125	125	103	23
Neonatology Patient Days	0	62	03	0	92	123	92	56	36
Pediatric Patient Days	0	31	N/A	0	45	N/A	45	29	17
Adult Medical Patient Days	U	31	14/74	U	40	11/7	70	25	17
Cardiology	0	12		0	16		16	15	5
Endocrinology	0	2		0	3		3	3	0
Gastroenterology	0	7		0	10		10	12	0
General Medicine	0	9		0	12		12	14	2
Hematology	0	1		0	2		2	1	1
Nephrology	0	2		0	3		3	3	1
Neurology	0	5		0	7		7	7	1
Oncology	0	3		0	4		4	2	3
Pulmonary	0	11		0	16		16	16	3
Rheumatology	0	0		0	1		1	1	0
Unknown	0	1		0	1		1	1	0
Medical Patient Day Total	0	54	63	0	75	90	90	75	15
Adult Surgical Patient Days									
Dentistry	0	0		0	0		0	0	0
Dermatology	0	0		0	0		0	0	0
General Surgery	0	15		0	22		22	14	7
Gynecology	0	3		0	5		5	4	1
Neurosurgery	0	4		0	5		5	2	3
Ophthalmology	0	0		0	0		0	0	0
Orthopedics	0	10		0	14		14	11	2
Otolaryngology	0	3		0	5		5	1	4
Thoracic Surgery	0	6		0	8		8	0	8
Urology	0	2		0	3		3	1	2
Vascular Surgery	0	4	20	0	5	40	5	2	3
Surgical Patient Day Total	0	47 9	38 3	0	67 13	49 6	67 13	37	30
Psychiatry Patient Days	0	9	3	U	13	0	13	3	10
Medical Detox Patient Days	0	1		0	2		2	1	1
Sub Acute/Transitional Care	0	33		0	45		45	45	0
Inpatient Care Totals	0	255	189	0	365	270	480	349	130
Inpatient Patient Days	Unmet need if (-)	-255	Over Utilization	on if (+)					
Substance Abuse Non-Acute	Care								
Adult Residential Treatment	0	66		0	96		96	96	0
Adol. Residential Treatment	0	43		0	59		59	59	0
SA Transitional Care	0	4		0	6		6	6	0
Substance Abuse Total	0	114	0	0	162	0	162	162	0
Elder Care									
Skilled Nursing Patients	0	1		0	1		1	1	0
Assisted Living Patients	0	1		0	1		1	1	0
Hospice Patients	0	0		0	0		0	0	0
Nursing Home Total	0	2	0	0	2	0	2	2	0



Market Assessment - Native American

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

V		2003			2015		2015 P	anning Acc	umption	
Year Pen DSA		611			896		2015 Planning Assumption			
HSP User Pop PSA		011			020					
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care	
	Pro	ovider Visits On	ly	Provider Visits Only			Provider Visits Only			
Ancillary Services										
Laboratory Services							•			
Clinical Lab Billable Tests		2,303	2,187		3,341	3,203	3,341	3,021	193	
Microbiology Billable Tests		330	512		481	750	750	433	289	
Blood Bank Billable Tests		57	41		83	62	83	78	2	
Anatomical Pathology	0.000	5	14		7	19	19	12	6	
Lab Billable Tests	2,200	2,695	2,753	3,226	3,912	4,033	4,033	3,543	489	
Pharmacy Scripts	0	5,743		0	8,391		8,391	8,391	0	
Acute Dialysis Procedures	0	2	054	0	2	265	2	2	0	
Radiographic Exams	107 0	181	251 35	157	262	365 52	365	365 52	0	
Ultrasound Exams Mammography Exams	0	32 51	50	0 0	46 73	66	52 73	52 73	0 0	
Fluoroscopy Exams	0	9	17	0	13	26	26	26	0	
CT Exams	0	13	6	0	18	9	18	18	0	
MRI Exams	0	8	U	0	12	3	12	12	0	
Nuclear Medicine Exams	0	27		0	39		39	39	0	
Rad. Oncology Treatments	0	Unknown		0	Unknown		0	0	0	
Chemotherapy Treatments	0	Unknown		0	Unknown		0	0	0	
Rehabilitation Services								-		
Physical Therapy Visits	0	Unknown		0	Unknown		0	189	0	
Occupational Therapy Visits	0	Unknown		0	Unknown		0	54	0	
Speech Therapy Visits	0	Unknown		0	Unknown		0	27	0	
Rehab Total Visits	0	-	186	0	-	270	270	270	0	
Respiratory Therapy		Unknown	2,738	0	Unknown	4,081	4,081	4,081	0	
Workload Minutes	0	Officiowif	2,700	Ū	Officiowii	4,001	4,001	4,001	U	
Cardiac Catheterization	0	1		0	4		4	4	0	
Home Health Care Patients	0	4		0	5		5	5	0	
Minor Procedure Cases	_	_		_						
Endoscopy	0	7		0	10		10	10	0	
Outpatient Surgery Cases Cardiovascular	0	0		0	4		4	4	0	
Digestive	0 0	0 7		0	1 10		1 10	1 10	0 0	
Endocrine	0	0		0 0	0		0	0	0	
ENT	0	6		0	9		9	9	0	
Gynecology	0	2		0	3		3	3	0	
Hemic and Lymphatic	0	0		0	0		0	0	0	
Integument	0	3		0	4		4	4	0	
Musculoskeletal	0	5		0	7		7	7	0	
Nervous	0	1		0	2		2	2	0	
Ocular	0	3		0	4		4	4	0	
Respiratory	0	0		0	1		1	1	0	
Urogenital	0	2		0	3		3	3	0	
OP Surgical Case Total	0	30	9	0	44	21	44	44	0	
Inpatient Surgery Cases	0	11	9	0	16	16	16	10	6	
Surgical Case Total	0	42	18	0	60	37	60	54	6	
EMS Responses	0	80		0	117		117	117	0	
	-								-	



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need	Delivery Options						
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA			ls due to shold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks

Primary Care (Provider Visits)

0.0%

Primary Care Clinic examines, diagnoses, and treats ambulatory patients giving continuity and coordination to their total healthcare including referral to other health professionals and admissions to inpatient services while retaining primary responsibility for care of these patients, as appropriate. Primary Care Clinic assesses, provides, and evaluates the care of patients with healthcare problems including history and physical, assessment and treatment of common minor illnesses, maintenance care of patients with chronic diseases, and health counseling and teaching.

Family Practice	2,259	2,259	Providers	1.1	3,555	1.1 SAC
Internal Medicine	262	262	Providers	0.1		rolled up in FP
Pediatric	772	772	Providers	0.2		rolled up in FP
Ob/Gyn	262	262	Providers	0.1		rolled up in FP
Urgent Care Clinic	0	0	Providers	0.0	0	<u>.</u>
Primary Care Total	3,555	3,555	Providers	1.1	3,555	1.1 SAC

Emergency Care

The Emergency Medical Clinic provides emergency care, diagnostic services, treatment, surgical procedures, and proper medical disposition of an emergency nature to patients who present themselves to the service. It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass casualty and fire drills; and prepares reports.

Emergency/Urgent	203	203	Patient Spaces	0.1	203
ER/Non-urgent	195	195	Providers	0.0	195
Emergency Care	398	398	Patient Spaces	0.2	398

Specialty Care

Crossover %	0.0%			
	. •			cialized capabilities diagnosis and procedures beyond the Primary Care team. ours for consistent referral patterns.
Orthopedics	130	130	Providers 0.0	130
Ophthalmology	90	90	Providers 0.0	90
Dermatology	101	101	Providers 0.0	101
General Surgery	103	103	Providers 0.0	103
Otolaryngology	74	74	Providers 0.0	74
Cardiology	23	23	Providers 0.0	23
Urology	32	32	Providers 0.0	32
Neurology	27	27	Providers 0.0	27
Subspecialties	124	124	Providers 0.1	124
Nephrology	0	0	Providers 0.0	0
Allergy	28	28	Providers 0.0	28
Pulmonology	12	12	Providers 0.0	12
Gerontology	Unknown	0	Providers Unknown	X
Gastroenterology	23	23	Providers 0.0	23
Rheumatology	Unknown	0	Providers Unknown	X
Oncology	17	17	Providers 0.0	17
Pediatric-Specialist	Unknown	0	Providers Unknown	X
Traditional Healing	0	0	Providers 0.0	
Specialty Care Sub-	785	785		785





Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delivery Options						
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referral Thres			
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remark	
Other Ambulatory Care											
Crossover % - Dental	6.0%		Crossover % - Optometry	0.0%							
Dental Service	90,208	90,208	Dentists	1.9	90,208					1.9 S	
			Visiting Specialist								
Dental Clinic provides a	assistance in	achieving a	nd maintaining the high	nest level of	oral health po	ossible. It also e	mphasizes i	the preventior	of disease.		
Optometry Visits	265	265	Optometrist	0.1			265	.2 VP SA	AC provides	space & s	
		•	ks, and adnexa includin	•	•	ocedures, presci	ibes lenses	to correct refi	ractive error	and impro	
			nosis and treatment of		lisease.						
Podiatry Visits	109	109	Podiatrists	0.0			109				
	•	•	nts with disorders, disea			•				•	
		•	rehensive plan of care		•	•	•			•	
			prevention of disease; a sion of reports, and mai	•			rices, medic	aı care evalua	auon, profes	sionai trai	
• •	0	0			inedical reco	orus.	0				
Dialysis Patients	U	U	Dialysis Stations	0.0			U				
ootential for remediation	n and rehabil	litation; assi	udiologic support for pa sts in the evaluation of aluations; neonatal hea	auditory and	l vestibular s	ystems. Specifi	services in	clude pure to	ne threshold	l audiomet	
	r mold fittings	•	evaluations, dispensing		•	, ,					
services, patient care, i outpatient) referred to t child abuse or attempte	information, re the Social Wo ad suicide). It	eferral, and ork Clinic, wi t provides a	logical, psychosocial, s follow-up services to fa hich includes self-referr comprehensive plan of	ncilitate med red patients f service to p	ical diagnosis and those se patients and t	s, care, treatmer en automatically heir families inc	nt; and prope on the bas luding couns	er disposition is of diagnosis seling and gui	of patients (s (for examp dance, thera	inpatient a le, suspec apy,	
			g; provides clinical and o personnel; prepares and		•				ry evaluatioi	n; professi	
Mental Health	109	109	Counselors	1.1	1.1					1.1 S	
Psychiatry Provider	67	67	Providers	0.0			67		-		
Social Service	0	0	Counselors	0.5	0.5					.5 S	
Alcohol & Substance Abuse	0	0	Counselors	0.0	0.0					Overr	
Behavioral Health Totals	176	176	Counselors	1.6	1.6		67				
npatient Care											
_abor & Delivery	48	48	LDRs	0.6	0		48				

maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.

Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to

Neonatology 56 56 # of Bassinets 0.8 0 56

The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.

Central Valley Indian Health, Inc. - Tachi 💐



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delivery Options					
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA Referrals due to Threshold				
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Pediatric Patient Days	29	29	# of Beds	0.5	0		29			

Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.

Adult Medical Acute Care

Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.

Cardiology	15	15	# of Beds 0.2	0	15	
Endocrinology	3	3	# of Beds 0.0	0	3	
Gastroenterology	12	12	# of Beds 0.1	0	12	
General Medicine	14	14	# of Beds 0.2	0	14	
Hematology	1	1	# of Beds 0.0	0	1	
Nephrology	3	3	# of Beds 0.0	0	3	
Neurology	7	7	# of Beds 0.1	0	7	
Oncology	2	2	# of Beds 0.0	0	2	
Pulmonary	16	16	# of Beds 0.2	0	16	
Rheumatology	1	1	# of Beds 0.0	0	1	
Unknown	1	1	# of Beds 0.0	0	1	
Medical Patient	75	75	0.9	0	75	
Day Total	73	73	0.9	J	73	
Adult Currinal Agusta	Cara					

Adult Surgical Acute Care

Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies

Dentistry	0	0	# of Beds 0.0	0	0	
Dermatology	0	0	# of Beds 0.0	0	0	
General Surgery	14	14	# of Beds 0.2	0	14	
Gynecology	4	4	# of Beds 0.1	0	4	
Neurosurgery	2	2	# of Beds 0.0	0	2	
Ophthalmology	0	0	# of Beds 0.0	0	0	
Orthopedics	11	11	# of Beds 0.2	0	11	
Otolaryngology	1	1	# of Beds 0.0	0	1	
Thoracic Surgery	0	0	# of Beds 0.0	0	0	
Urology	1	1	# of Beds 0.0	0	1	
Vascular Surgery	2	2	# of Beds 0.0	0	2	
Surgical Patient Day Total	37	37	# of Beds 0.6	0	37	
Intensive Care	36	36	# of beds 0.1	0	36	

Intensive Care Units (ICUs) provide treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. They are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating.

Psychiatry	3	3	# of Beds 0	0.0	0	3

Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.

The California Area Health Services Master Plan Central Valley Indian Health, Inc. - Tachi



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

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Establishes Projecte	ed workload	and key o	haracteristics per p	roduct line,	while reco	mmending a	delivery op	tion.		
			Projected Need				Delivery	Options		
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd	PSA			Referral Thre		
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Medical Detox	1	1	# of Beds	0.0	0		1			
Substance Abuse Care diagnosis, treatment, a when required to preve sensitive or medically p	nd proper dispent injury to the	position of p emselves or	eatients psychologically to others; establishes	or physicall therapeutic	y dependent regimens; co	t upon alcohol o onducts individu	r drugs; main al or group th	tains protect nerapy sessio	ive custody o ons; maintain	of patients as custody of
Sub Acute / Transitional Care	45	45	# of Beds	0.2	0		45			
Transitional Care provi acute care, provides sp			, ,	,	U	eyond their disci	harge from a	cute care. Si	affing, while	less than
Inpatient Care Totals	386	386	# of Beds	4	0		386			
Substance Abuse Non-Acute Care	Acuto Coro	the treatme	nt of substance abuse	dinordora in	on ago and	acquity apositi	o sotting			
Substance Abuse Non-	-Acute Care -	trie treatme	ni oi substance abuse	alsoraers iri	an age and	security specific	; seung.			
Adult Residential Treatment	96	96	# of Beds	0.4			96		96	
Adolescent Residential	59	59	# of Beds	0.2			59		59	

Residential	59	59	# of Beds	0.2	59
Treatment					
Substance Abuse	6	6	# of Beds	1.1	6
Transitional Care	U	O	# OI Deus	1.1	
Substance Abuse					
Non-Acute Care	162	162		1.6	162

Totals Elder Care

Elderly Care Program provides physical, psychological, social, and spiritual care for healthy and dying seniors in an environment outside of a hospital.										
Nursing Home	1	1	# of Beds	1.0	1					
Assisted Living	1	1	# of Beds	1.0	1 1					
Hospice	0	0	# of Beds	0.0	0 0					
Elder Care Totals	2	2		2.0	2 1					

Ancillary Services

Crossover % -

0.0% Pharmacy

Laboratory

Clinical Pathology operates the clinical laboratories and conducts studies, investigations, analyses, and examinations, including diagnostic and routine tests and systems. Additional activities may include, but are not limited to, transportation of specimens from the nursing floors and surgical suites and preparation of samples for testing. The Clinical Lab includes Chemistry, Urinalysis, Hematology, Serology, Immunology and Coagulation.

Clinical Lab	3,021	3,021	Techs @ Peak	0.3	3,021	SAC - waive test only
Microbiology	433	433	Techs @ Peak	0.0	433	
Blood Bank	78	78	Techs @ Peak	0.0	78	
Anatomical	12	12	Techs @ Peak	0.0	12	

Anatomical Pathology conducts the histopathology and cytopathology laboratories; directs studies, examinations, and evaluations including diagnostic and routine procedures; provides referrals and consultations; performs post-mortem examinations; and operates the morgue.

h			, p p		, -		
Lab Totals	3,543	3,543	Techs @ Peak	0.0	0	3,543	
Pharmacy	8,391	8,391	Pharmacists	0.0		8,391	SAC (part-time)
Acute Dialysis	2	2	Rooms	0.0		2	

Acute Dialysis Services provides purification of the patient's blood, removing excess water and toxins, at the bedside while the patient is hospitalized. Specialty trained personnel, supervised by a nephrologist, rotate through the hospital caring for and providing this service to admitted patients requiring dialysis.

Central Valley Indian Health, Inc. - Tachi



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delivery Options					
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referrals Thresh		
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Diagnostic Imaging					-					
Diagnostic Radiology p interpreting, storing, an	•		•	•					•	•
Radiographic	365	365	Rooms	0.1			365			
Ultrasound		52	Rooms	0.0			52			
Mammography		73	Rooms	0.0			73			
Fluoroscopy		26	Rooms	0.0			26			
CT		18	Rooms	0.0			18			
MRI		12	Rooms	0.0			12			
Diagnostic Imaging Totals	545	545	Radiologist	0.0			545			
Nuclear Medicine Nuclear Medicine provi	39	39	Rooms	0.0			39			
Performing clinical invectors with patients Rad. Oncology Chemotherapy Rehabilitation Services and outpatients whose	0 0 0 ces develops, co	og physician 0 0 ordinates, a	s, and maintaining radi Rooms Patient Spaces and uses special knowled	0.0 0.0 0.0 edge and sk	te disposal ar	nd storage of ra	dioactive ma 0 0 nd managinges such as: c	terials. programs for direct patient ca	the care of	f inpatients
consultation, counseling Occupational Therapy,			on, research, and comn	nunity servic	es. This serv	rice typically col	nsists of three	e disciplines: i	Physical Ti	nerapy,
Physical Therapy		189	Therapy FTE	0.1			189			
Occupational		54	Therapy FTE	0.0			54			
Speech Therapy		27	Therapy FTE	0.0			27			
Rehab Total	270	270	Therapy FTE	0.2			270			
Respiratory Therapy	4,081	4,081	Therapy FTE	0.1			4,081			
Respiratory Therapy proforms of rehabilitative to service also tests and oblood.	herapy includ	ling initiating	g, monitoring, and evalu	ating patier	nt performance	e and reactions	to therapy a	nd performing	blood gas	analysis. The
Cardiac Catheterization Cases	4	4	Rooms	0.0			4			
The Cardiac Catheteriz heart and circulatory sy retrieving and analyzin	stem. Other	activities in	clude explaining test pr	ocedures to	patients; per	forming invasiv				
Home Health Care	5	5	# FTE	0.4			5		5	
Home Health Care is p			•		•	, maintain, or re	estore health	or to maximize	e the level	of
The Surgery product lin Minor Procedure Room		nesthesiolog	gy, Pre & Post Recover	y, and the p	rovision of in	/asive procedui	es requiring	the sterility of	an Operati	ng Room or
Minor Procedure	40	40	E 1 2 "				40			
Endoscopy Outpatient Surgery	Cases	10	Endo Suites	0.0			10			
Cardiovascular		1	Outpatient ORs	0.0			1			
Digestive		10	Outpatient ORs	0.0			10			
Endocrine		0	Outpatient ORs	0.0			0			
ENT		9	Outpatient ORs	0.0			9			
Gynecology		3	Outpatient ORs	0.0			3			
Hemic / Lymphatic		0	Outpatient ORs	0.0			0			
Integument		4	Outpatient ORs	0.0			4			
Musculoskeletal	7	7	Outpatient ORs	0.0			7			

The California Area Health Services Master Plan Central Valley Indian Health, Inc. - Tachi



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delive	y Options	
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd	PSA	Referrals due to Threshold	
Discipline	Care	Care	(KC)	in 2015	On Site On Site VP CHS*	Srv Unit Region	Remark
Nervous	2	2	Outpatient ORs	0.0	2		
Ocular	4	4	Outpatient ORs	0.0	4		
Respiratory		1	Outpatient ORs	0.0	1		
Urogenita		3	Outpatient ORs	0.0	3		
OP Surgical Case		44	Outpatient ORs	0.0	44		
npatient Surgery Surgical Case	10	10 54	Inpatient ORs	0.0	63		
Administrative Support							
Administration			# of FTE	2.5	2.5		SA
	es, administer	s, and supe			strative aspects of the facility; responsib	le for all personnel assigne	
					officers, support staff, and facilities; in		
esponsible for the car	e, treatment, a	and welfare	of all patients.				
Nursing Administrat			# of FTE	0.0	0.0		i <mark>n Adn</mark>
Oversees the nursing of Manages nursing qual		-	th inpatient and outpati	ent. Respoi	nsible for the hiring and continued educ	ation of the nursing and me	dical aid s
Quality Managemer			# of FTE	0.0	0.0		in Adm
		professiona			efforts within the facility and patient care	utilization review.	
nformation Manage	ament		# of FTE	1.0	1.0		S
		nt provides		_	day to day operation, training, mainten	ance and development of th	
_		•	•				-
omputerization hardw	are, software	ana netwoi	rking resources allocate	d to the faci	illy by the malan nealth Service.		
			# of FTE	d to the faci	4.2		Si
lealth Information	Managemen	t	# of FTE	4.2	- 	I safekeeping of patient rec	
lealth Information lealth Information Ma lealth Information Ma alled charts) in order	Managemen nagement is r	t esponsible	# of FTE for assembling, collection improve patient care.	4.2 ng, completi	4.2 ing, analyzing, ensuring availability, an	d safekeeping of patient rec	ords (also
Health Information Health Information Ma Health Information Ma Health Information Ma Health Information Ma Health Information	Managemen nagement is ro to facilitate, ev	t esponsible valuate, and	# of FTE for assembling, collecti d improve patient care. # of FTE	4.2 ng, completi 2.0	4.2 ing, analyzing, ensuring availability, an		ords (also S <i>i</i>
lealth Information lealth Information Ma alled charts) in order susiness Office dusiness Office impler	Management is re to facilitate, evenents adminis	t esponsible valuate, and trative proc	# of FTE for assembling, collection in improve patient care. # of FTE redures to maximize near	4.2 ng, completi 2.0 t recovery of	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pa	arty payers; identifies patien	ords (also Sa ts that hav
Health Information dealth Information Maled charts) in order Business Office Business Office impler ther health insurance	Management is re to facilitate, evenents adminis ; reviews all a	t esponsible valuate, and trative proc spects of ac	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne- ccounts receivable man	4.2 ng, complete 2.0 t recovery of agement, co	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirem	arty payers; identifies patien	ords (also Si ts that hav
Health Information dealth Information Manalled charts) in order Business Office Business Office implements ther health insurance bayers; follows up to e	Management is re to facilitate, evenents adminis ; reviews all a	t esponsible valuate, and trative proc spects of ac	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne ccounts receivable man made; and documents	4.2 ng, completi 2.0 t recovery or agement, co	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirems collection activities.	arty payers; identifies patien	ords (also SA ts that hav nird-party
Health Information dealth Information Maled charts) in order Business Office Business Office impler ther health insurance layers; follows up to e Contract Health	Management is reto facilitate, extends adminis; reviews all annure that col.	t esponsible valuate, and trative proc spects of ad lections are	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne- ccounts receivable man made; and documents # of FTE	4.2 ng, complete 2.0 t recovery or agement, or and reports 1.2	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirem	arty payers; identifies patien ents; submits all claims to th	SA SA ts that hav nird-party
Health Information Manager	Management is represented in the second of t	t esponsible valuate, and trative proc spects of a elections are ordinates a	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne- cocounts receivable man made; and documents # of FTE ccess to medical care t	4.2 ng, completi 2.0 t recovery or agement, or and reports 1.2 that is not av	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirems collection activities. 1.2	arty payers; identifies patien ents; submits all claims to th determining eligibility for Cor	SA ts that hav nird-party SA ntract Heal
Health Information Manager	Management is represented in the second of t	t esponsible valuate, and trative proc spects of a elections are ordinates a	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne- cocounts receivable man made; and documents # of FTE ccess to medical care t	4.2 ng, completi 2.0 t recovery or agement, or and reports 1.2 that is not av	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirems collection activities. 1.2 vailable at the facility. This is done by o	arty payers; identifies patien ents; submits all claims to th determining eligibility for Cor	SA ts that hav nird-party SA ntract Heal
Health Information Manalled charts) in order Business Office Business Office implementer health insurance payers; follows up to econtract Health Contract Health Service Care, identifying other	Management is represented in the second of t	t esponsible valuate, and trative proc spects of a elections are ordinates a	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne- cocounts receivable man made; and documents # of FTE ccess to medical care t	4.2 ng, completi 2.0 t recovery or agement, or and reports 1.2 that is not av	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirems collection activities. 1.2 vailable at the facility. This is done by o	arty payers; identifies patien ents; submits all claims to th determining eligibility for Cor	Site of the second seco
Health Information dealth Information Manalled charts) in order Business Office Business Office implements the health insurance busyers; follows up to econtract Health Service Care, identifying other facility Support	Management is represented in the second of t	t esponsible valuate, and trative proc spects of a elections are ordinates a	# of FTE for assembling, collecti d improve patient care. # of FTE redures to maximize ne- cocounts receivable man made; and documents # of FTE ccess to medical care t	4.2 ng, completi 2.0 t recovery or agement, or and reports 1.2 that is not av	4.2 ing, analyzing, ensuring availability, an 2.0 f healthcare delivery costs from third-pomplies with third-party payer requirems collection activities. 1.2 vailable at the facility. This is done by o	arty payers; identifies patien ents; submits all claims to th determining eligibility for Cor	Site of the second seco
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managing the installation medical war readiness material program.

The California Area Health Services Master Plan Central Valley Indian Health, Inc. - Tachi



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

	Projected Need Delivery Options									
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referrals Thres		
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
lousekeeping & Li			# of FTE	1.0	1.0					SA
			lity for maintaining the l up, sorting, issuing, dist							
			education programs wing all areas of the facility							
Public Health Nursi	na		# of FTE	3.2	3.2					SAC
Public Health Nutrit	_		# of FTE	0.7	0.7					SA
Environmental Hea			# of FTE	0.0	0.0					.
Health Education			# of FTE	0.0	0.0					
Additional Services										
Case Management			# of FTE	0.0	0.0					ncl. in PHI
Case Management pr	ovides profess	sional staff o	dedicated to insuring a	continuum o	f care and fol	llow up for chror	nically ill or po	otentially chro	nically ill pa	tients.
CHR			# of FTE	0.0	1.0					Currently
	resentatives i	nform com	nunity members about		-	make referrals	to appropriat	te agencies, a	and assist P	
oasic health care scre	ening. Also pa	articipate in	health promotion activi	ties and hea	lth fairs.			,		
Diabetes Program			# of FTE	0.0	0.0					
The Diabetes Progran			patient's education and inically with pre-renal e				diabetic pati	ent with preve	entive educa	ation and
Senior Citizen Cen			# of FTE	0.0	0.0					
Congregate meal, mea	al delivery, co	mpanionshi _l	o, advisory, exercise, tr	ransport. (3 p	people per ce	enter; Suprv., Co	ok, Driver) (Centers/Staff)		
140	447	447	1 #4 # - (FTF				447			
EMS	117	117	Loc #1 - # of FTE	0.0	0.0		117			
			# of Ambulances Loc #2 - # of FTE	0.0	0.0					
			# of Ambulances	0.0	0.0					
			Loc #3 - # of FTE	0.0	0.0					
			# of Ambulances	0.0	0.0					
mergency Medical S	ervices provid	le emergend	cy medical services with			ervice unit. Ambi	ulances are a	available twer	nty-four hou	rs a day
even days a week, si	taffed with Sta	te Certified	EMT, IEMT and Param	nedics.						
Alternative Medicin			# of FTE	0.0	0.0					
•			iropractic services to th			educational serv	ices related t	to various hea	alth issues.	It also seek
	community me	mbers may	have regarding unaddi							
Fransportation		-(# of FTE	1.0	1.0		-1			Currently '
			ity residents to health re nce and the administra							expenses
Maternal Child Hea	lth		# of FTE	0.0	0.0					
			ride basic prenatal and aluations for pre and po							
MIC			# at FTF	0.0	0.0					2 Current
NIC Program provide	e nutrition ser	ening nutr	# of FTE ition education, suppler	0.0	0.2	needed Comm	unity recour	res for pream		.2 Currentl
			rs of age who meet inc							oung,
oostpartum women, in										
oostpartum women, in			# of FTE	1.0	1.0					1 Currentl

The California Area Health Services Master Plan Central Valley Indian Health, Inc. - Tachi



Delivery Plan - Native American (IHS)

Small Health Clinic SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need				Delivery	Options		
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA			s due to shold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Domestic Violence			# of FTE	0.0	0.0					
Family Planning/Dome education, appointment domestic violence thro programs such as WIC	nt referrals for ugh the provis	sterilization	procedures, and pre-n	atal/post-na	tal home visi	ts to discuss fan	nily planning	needs; as we	ell as lowerin	g incidents o
Wellness Center			# of FTE	0.0	0.0					
Wellness Center provide support or cooperation						cans of all ages,	acting eithe	r as an indep	endent servi	ice or in
Outreach Elder Car	е		# of FTE	0.0	0.0					
Elder Care provides ar education and health b			ded by the staff.	n outreach p	rogram for th	e community's e	elders. Lunci	h distribution	, social funct	ions, health
HIV/AIDS			# of FTE	0.0	0.0					
Coordinates all educat with HIV/AIDS.	ional services	for persons	at high-risk for contra	cting the viru	us which caus	ses HIV/AIDS.(Case manage	ement is also	provided to	those living
Injury Prevention			# of FTE	0.0	0.0					
Reduce injury morbidit	y and mortalit	y among Na	ative Americans.							
Tribal Health Admir			# of FTE	0.0	0.0					
Tribal Health Administration personal control over to	•			health servi	ices for servi	ce unit residents	, while enco	uraging more	self-reliance	e and
Tobacco			# of FTE	0.0	0.0					
Tobacco prevention ar smoke. It also encoura						nd possession a	as well as red	ducing expos	ure to secon	d hand
Bio-Terrorism			# of FTE	0.0	0.0					
The bioterrorism progra security systems and a	•		, .	•	cy response a	activities, includi	ng emerging	infectious di	seases, hea	lthcare
Total 2015 Non-De	viated RRN	Staff FT	Es	29.9	33.1	Required IHS	S Supporta	able Space	Staff	SAC

Central Valley Indian Health, Inc. - Tachi



Resource Allocation - Native American (IHS)

Small Health Clinic SAC

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct Health Care				Contract Health Care		
Discipline	Planned Projected Provider Visits	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected Provider Visits	Cost / Unit	Total CH Dollars
Primary Care	Only					Only		
Family Practice	3,555	Providers	1.1	1.0	91%	0	\$64	\$0
	Visiting Provid	lers to outlying areas.						
		Provider Offices	1.0	1.0	100%			
Internal Medicine	0	Exam Rooms Providers	4.0 0.0	4.0	100% 100%	0	\$64	\$0
internal Medicine		lers to outlying areas.	0.0		100%	U	φ04	φυ
	v.eg e v.e	Inpatient Physician	0.0		100%			
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Pediatric	0	Providers	0.0		100%	0	\$50	\$0
	Visiting Provid	lers to outlying areas.	0.0		4000/			
		Inpatient Physician Provider Offices	0.0		100% 100%			
		Exam Rooms	0.0		100%			
Ob/Gyn	0	Providers	0.0		100%	0	\$110	\$0
	Visiting Provid	lers to outlying areas.			10070	_	Ψ	-
	•	Inpatient Physician	0.0		100%			
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Urgent Care Clinic	0 Visiting Provide	Providers lers to outlying areas.	0.0		100%			
	visiting Provid	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Primary Care Total	3,555	Providers	1.1	1.0	91%	0		\$0
	,	Provider Offices	1.0	1.0	100%			
		port (RN+LPN+CNA)		2.0	100%			
	Ambula	atory Care Nutritionist			100%			
		Exam Rooms	4.0	4.0	100%			
		Dept. Gross Sq. Mtrs	233.2	161.5	69%			
Emergency Care	0	ER Providers	0.0		100%	398	\$261	\$103,751
ŭ ,	Nursir	ng Support (RN+LPN)	0.0		100%			
		Patient Spaces	0.0		100%			
	Provider Visits	Dept. Gross Sq. Mtrs	0.0		100%	Daniel de Mieles		
Specialty Care	Only					Provider Visits Only		
Orthopedics	0	Providers	0.0		100%	130	\$134	\$17,430
		lers to outlying areas.						
		Provider Offices	0.0		100%			
On both almost a mi		Exam Rooms	0.0		100%	00		#40.000
Ophthalmology	0 Visiting Provide	Providers lers to outlying areas.	0.0		100%	90	\$136	\$12,282
	visiting FIOVIC	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Dermatology	0	Providers	0.0		100%	101	\$73	\$7,313
-,	Visiting Provid	lers to outlying areas.						
		Provider Offices	0.0		100%			
Company Comment		Exam Rooms	0.0		100%	400	0400	#40.000
General Surgery	0 Visiting Provide	Providers	0.0		100%	103	\$163	\$16,880
	visiting Provid	lers to outlying areas. Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Otolaryngology	0	Providers	0.0		100%	74	\$86	\$6,369
, 5 0,	Visiting Provid	lers to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			

Central Valley Indian Health, Inc. - Tachi



Resource Allocation - Native American (IHS)

Small Health Clinic SAC

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	Direct Health Care					Contract Health Care		
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Cardiology	0	Providers	0.0		100%	23	\$126	\$2,861
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Urology	0	Providers	0.0		100%	32	\$163	\$5,236
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
Namelani	0	Exam Rooms	0.0		100%	07	# 400	#0.007
Neurology	0 Visiting Provide	Providers ders to outlying areas.	0.0		100%	27	\$133	\$3,637
	VISITING FIOVIC	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
011 0 1 111		LAMII IXOOIIIS	0.0		100 /0	404	000	044.050
Other Subspecialties						124	\$96	\$11,859
Nephrology	0	Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Allergy		Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.	0.0		4000/			
		Provider Offices	0.0		100%			
Dulmanalamu		Exam Rooms	0.0		100%			
Pulmonology	Viciting Provin	Providers	0.0		100%			
	Visiting Provid	ders to outlying areas. Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Gerontology	-	Providers	0.0		100%			
Ceremology	Visiting Provid	ders to outlying areas.	0.0		10070			
	violarig i rovio	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Gastroenterology		Providers	0.0		100%			
0,	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Rheumatology		Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Oncology		Providers	0.0		100%			
	visiting Provid	ders to outlying areas.	0.0		40007			
		Provider Offices	0.0		100%			
Pediatric-Specialist		Exam Rooms Providers	0.0		100% 100%			
rediatric-Specialist	Viciting Provin	ders to outlying areas.	0.0		100%			
	VISITILY FIUVIO	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Traditional Healing		Providers	0.0		100%			
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Podiatry Visits	0	Podiatrists	0.0		100%	109	\$0	\$0
Ť	Visiting Provid	ders to outlying areas.						
	-	Podiatry Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Specialty Care Sub-Total	0	Exam Rooms	0.0	0.0	100%	814		\$83,866
		Provider Offices	0.0	0.0	100%			
	Nursing Sup	port (RN+LPN+CNA)	0.0		100%			
		Dept. Gross Sq. Mtrs	0.0		100%			
Total In-House Providers	3,555	Providers	1.1	1.0	91%			
Total III Floudo Floviucia	0,000	1 10410013	1.1	1.0	J 1 /0			

Central Valley Indian Health, Inc. - Tachi



Resource Allocation - Native American (IHS)

Small Health Clinic SAC

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct He	alth Care			Conti	act Healt	n Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Visiting Professional Clinic	0	Exam	0.0		100%	SAC provid		
Services Include:		Provider Offices Dept. Gross Sq. Mtrs	0.0		100% 100%	for VP for C	ptometry	(.2 FTE)
Other Ambulatory Care		Dept. Gloss Sq. Mils	0.0		100 /6			
Services								
Dental Service Minutes	90,208	Dentists	1.9	0.2	11%	0	\$0	\$0
	V D .	Visiting Specialists	0.0		100%			
	Visiting Provid	ders to outlying areas. Hygienists	0.5	0.2	40%			
		Dental Chair	4.0	3.0	75%			
		Specialist Chair	0.0		100%			
	_	Dept. Gross Sq. Mtrs	219.4	79.8	36%	-		
Optometry Visits	0	Optometrist	0.0		100%	265	\$204	\$54,115
	Visiting Provid	ders to outlying areas. Provider Offices	0.0		100%			
		Eye Lanes	0.0		100%	Allowed .2 F	TF	
		Dept. Gross Sq. Mtrs			100%	Use Minor F		Room
Dialysis Patients	0	Dialysis Stations	0.0		100%	0	\$328	\$0
	_	Dept. Gross Sq. Mtrs			100%			
Audiology Visits	0	Audiologists	0.0		100%	162	\$0	\$0
	visiting Provid	ders to outlying areas. Audiologist Offices	0.0		100%			
		Audiologist Offices Audiology Booths	0.0		100%			
		Dept. Gross Sq. Mtrs			100%			
Dehavieral Health								
Behavioral Health Mental Health		Counselors	1.1		0%	-		
Psychiatry		Counselors	0.0		100%	SAC provid	es staff &	space
Social Service		Counselors	0.5		0%	or to provid	oo olan a	ориос
Alcohol & Substance Abuse		Counselors	0.0		100%			
Behavioral Health Total		Total Counselors	1.6	0.0	0%	67	\$0	\$0
	Visiting Provid	ders to outlying areas.	0.0		00/			
		Counselor Offices Dept. Gross Sq. Mtrs	2.0 72.8		0% 0%			
		Dept. Gloss Sq. Milis	12.0		U70			
Inpatient Care	_							
Births	0	LDRPs	0.0		100%	58	\$1,983	\$115,642
Obstetric Patient Days	0	Dept. Gross Sq. Mtrs Post Partum beds	0.0		100%	125		
Obstettic Fatterit Days	U	Dept. Gross Sq. Mtrs	0.0		100%	125		
Neonatology Patient Days	0	# of Bassinets	0.0		100%	92	\$562	\$51,499
, , , , , , , , , , , , , , , , , , ,		Dept. Gross Sq. Mtrs	0.0		100%		·	
Pediatric Patient Days	0	# of Beds	0.0		100%	45	\$562	\$25,549
		Dept. Gross Sq. Mtrs	0.0		100%		A 1	*
Adult Medical Acute Care	0	# of Beds Dept. Gross Sq. Mtrs	0.0		100% 100%	90	\$1,918	\$172,935
Adult Surgical Acute Care	0	# of Beds	0.0		100%	67	\$1,918	\$127,973
Addit Odigiodi Addite Odie	<u> </u>	Dept. Gross Sq. Mtrs			100%	O1	ψ1,510	Ψ121,010
Intensive Care Patient Days	0	# of Beds	0.0		100%	36	\$1,918	\$70,004
		Dept. Gross Sq. Mtrs			100%			
Psychiatric Patient Days	0	# of Beds	0.0		100%	13	\$356	\$4,586
Modical Datay Batiant Davis	-	Dept. Gross Sq. Mtrs			100%	2	¢ 256	¢750
Medical Detox Patient Days	0	# of Beds Dept. Gross Sq. Mtrs	0.0 0.0		100% 100%	Z	\$356	\$750
Sub Acute/Transitional Care	0	# of Beds	0.0		100%			
and and and and	· ·	Dept. Gross Sq. Mtrs			100%			
Inpatient Care Total	0	# of patient beds	0	0	100%	471		\$568,937
		Dept. Gross Sq. Mtrs	0	0	100%			

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Resource Allocation - Native American (IHS)

Small Health Clinic SAC

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Care			Contract Health Care				
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Ancillary Services								
Laboratory Services								
Clinical Lab	0	Tech staff @ peak	0.0		100%	SAC provid	des space	for
Microbiology Lab	0	Tech staff @ peak	0.0		100%	Waive test		
Blood Bank	0	Tech staff @ peak	0.0		100%		•	1
Anatomical Pathology	0	Tech staff @ peak	0.0		100%			
Lab Total	0	Tech staff @ peak	0.0	0.0	100%	3,543	\$192	\$681,484
		Dept. Gross Sq. Mtrs	0.0	16.3	100%			
Pharmacy	0	Pharmacists	0.0		100%	8,391		\$0
		Dept. Gross Sq. Mtrs	57.1		0%	SAC space	for VP	
Acute Dialysis	0	Rooms	0.0		100%	Pharmacist	s (57.1 sm)
		Dept. Gross Sq. Mtrs	0.0		100%			
Diagnostic Imaging								
Radiographic exams	0	Rooms	0.0		100%	365	\$232	\$84,511
Ultrasound Exams	0	Rooms	0.0		100%	52	\$302	\$15,562
Mammography Exams	0	Rooms	0.0		100%	73	\$136	\$9,862
Fluoroscopy Exams	0	Rooms	0.0		100%	26	\$56	\$1,452
CT	0	Rooms	0.0		100%	18	\$736	\$13,244
MRI exams	0	Rooms	0.0		100%	12	\$1,314	\$16,054
Diagnostic Imaging Total	0	Radiologists	0.0		100%	545		\$140,686
		Dept. Gross Sq. Mtrs	0.0		100%			
Nuclear Medicine	0	Rooms	0.0		100%	39	\$723	\$28,114
		Dept. Gross Sq. Mtrs	0.0		100%			
Radiation Oncology	0	Rooms	0.0		100%			
		Dept. Gross Sq. Mtrs	0.0		100%			
Chemotherapy	0	Patient Spaces	0.0		100%	0	\$1,192	\$0
Rehabilitation Services		Dept. Gross Sq. Mtrs	0.0		100%			
PT Visits	0	Therapy FTE	0.0		100%			
OT Visits	0	Therapy FTE	0.0		100%			
Speech Therapy Visits	0	Therapy FTE	0.0		100%			
Rehab Total	0	Therapy FTE	0.0	0.0	100%	270	\$74	\$19,881
Nellab Total	O	Dept. Gross Sq. Mtrs	0.0	0.0	100%	210	Ψ1-4	ψ15,001
RT Workload Minutes	0	Therapy FTE	0.0		100%	4,081		\$0
KT Workload Williates	O	Dept. Gross Sq. Mtrs	0.0		100%	7,001		ΨΟ
Cardiac Catheterization	0	Rooms	0.0		100%	4	\$3,378	\$12,005
Cardiac Carroterization	U	Dept. Gross Sq. Mtrs	0.0		100%	4	ψυ,υτυ	Ψ12,000
Surgery		Dopt. Oloss Sq. Mills	0.0		100/0	-		
Outpatient Endoscopy Cases	0	Endoscopy Suites	0.0		100%	10	\$1,495	\$14,454
Outpatient Surgery Cases	0	Outpatient ORs	0.0		100%	44	\$1,495	\$72,345
Inpatient Surgical Cases	0	Inpatient ORs	0.0		100%	10	ψ1,001	\$0
inpatient Surgical Cases	U	# of Pre-Op Spaces	0.0		100%	10		ΨΟ
		# of PACU Spaces	0.0		100%			
		# of Phase II Spaces	0.0		100%			
Surgical Case Total	0	# of ORs	0.0	0.0	100%	63		\$86,799
Surgical Case Total	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	03		φου,799
Administrative Support		•						
Administration		# of FTE	2.5		0%	Supported a	at Clovis	
, aminoration		Dept. Gross Sq. Mtrs	83.2		0%	σαρροποά ε	a Olovio	
Nursing Administration		# of FTE	0.0		100%			
radioning Administration		Dept. Gross Sq. Mtrs	0.0		100%			
Quality Management		# of FTE	0.0		100%			
Quality ivialiagement		Dept. Gross Sq. Mtrs	0.0		100%			
Information Management		# of FTE	1.0		0%	Supported	at Clovic	
mornation wanagement		Dept. Gross Sq. Mtrs	32.4		0% 0%	Supported a	il CIOVIS	
Health Information Mngmt.		# of FTE	4.2		0%	Supported a	at Clovis	
. Ioa.ur imoimauoir ivingint.		Dept. Gross Sq. Mtrs	50.0		0%	Capponea e	Olovio	
·		Dopt. Gross oq. Milis	30.0					

Central Valley Indian Health, Inc. - Tachi



Resource Allocation - Native American (IHS)

Small Health Clinic

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	Direct Health Care				Contract Health Care			
Discipline	Planned Key Characteristics Projected (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars	
Business Office	# of FTE	2.0	1.0	50%	Supported at			
Dusiness Office	Dept. Gross Sq. Mtr		14.3	26%	Receptionist)	Ciovis (iviedi	Cai	
Contract Health	# of FTE	1.2	17.0	0%	Supported a	t Clovis		
Contract Health	Dept. Gross Sq. Mtr			100%	Зирропеч г	il Ciovis		
- III 0		0.0		10070				
Facility Support Services								
Clinical Engineering	# of FTE	0.5		0%				
	Dept. Gross Sq. Mtr			100%				
Facility Management	# of FTE	0.5		0%				
Control Ctorilo	Dept. Gross Sq. Mtr			100%				
Central Sterile	# of FTE	0.0		100%				
Diata	Dept. Gross Sq. Mtr			100%				
Dietary	# of FTE	0.0		100%				
Duran auto 9 Commile	Dept. Gross Sq. Mtr # of FTE	0.0 0.0		100%				
Property & Supply			10.8	100%	Supported a	4 Clavia		
Housekeeping & Linen	Dept. Gross Sq. Mtr # of FTE	1.0	10.6	21%	Supported a			
nousekeeping & Linen	Dept. Gross Sq. Mtr		4.6	0% 29%	<i>Зирропеа а</i>	il Ciovis		
	Dept. Gloss 3q. Mili	5 10.1	4.0	29%				
Preventive Care								
Public Health Nursing	# of FTE	3.2		0%	Supported a	t Clovis		
3	Visiting Providers to outlying areas							
	Dept. Gross Sq. Mtr	s 54.6		0%				
Public Health Nutrition	# of FTE	0.7	0.1	14%	Supported a	t Clovis		
	Visiting Providers to outlying areas				• •			
	Dept. Gross Sq. Mtr			0%				
Environmental Health	# of FTE	0.0		100%	Supported a	t Clovis		
	Dept. Gross Sq. Mtr	s 0.0		100%	• •			
Health Education	# of FTE	0.0		100%				
	Dept. Gross Sq. Mtr	s 0.0		100%				
Case Management	# of FTE	0.0		100%				
S	Visiting Providers to outlying areas							
	Dept. Gross Sq. Mtr	s 0.0		100%				
CHR	# of FTE	1.0	1.0	100%				
	Dept. Gross Sq. Mtr	s 13.6		0%				
Diabetes Program	# of FTE	0.0		100%				
	Dept. Gross Sq. Mtr	s 0.0		100%				
HIV/AIDS	# of FTE	0.0		100%				
	Dept. Gross Sq. Mtr	s 0.0		100%				
Tobacco	# of FTE	0.0		100%				
	Dept. Gross Sq. Mtr	s 0.0		100%				
WIC	# of FTE	0.2	0.2	100%				
	Dept. Gross Sq. Mtr	s 2.7	8.6	316%				
Wellness Center	# of FTE	0.0		100%				
	Dept. Gross Sq. Mtr	s 0.0		100%				
Additional Services - IHS Su	nnorted							
Transportation	# of FTE	1.0	1.0	100%	0	\$161	\$0	
.,	Dept. Gross Sq. Mtr			0%		, -	7.	
Domestic Violence	# of FTE	0.0		100%				
	Dept. Gross Sq. Mtr			100%				
EMS	# of FTE	0.0		100%	117	\$642	\$75,406	
-	# of Ambulances	0.0		100%		, - · -	, 2, . 30	
	Dept. Gross Sq. Mtr			100%				
	· · · · · · · · · · · · · · · · · · ·			100%				
Maternal Child Health	# of FTF	U.U						
Maternal Child Health	# of FTE Dept. Gross Sa. Mtr	0.0 s 0.0						
Maternal Child Health Tribal Health Administration	# of FTE Dept. Gross Sq. Mtr # of FTE			100%				

Central Valley Indian Health, Inc. - Tachi



Resource Allocation - Native American (IHS)

Small Health Clinic SAC

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Car					Contract Health Care		
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Alternative Medicine		# of FTE	0.0		100%			
Die Teinerden		Dept. Gross Sq. Mtrs # of FTE	0.0		100%			
Bio-Terrorism		# of FTE Dept. Gross Sq. Mtrs	0.0		100% 100%			
Injury Prevention		# of FTE	0.0		100%			
injury i revention		Bldg. Gross Sq. Mtrs.			100%			
Security		# of FTE	1.0	1.0	100%			
		Dept. Gross Sq. Mtrs	6.2		0%			
Total 2015 Non-Deviated RRM Positions	vs Existing	Recurring IHS	29.9	7.5	25%			
IHS Supportable Space Staff R	Required vs.	Existing	33.1	8.3	25%			
IHS Supportable Space - Build	ling Gross S	quare Meters	1,410	296	21%			SAC
Substance Abuse Non- Acute Care							,	
Adult Residential Treatment	0	# of Beds Dept. Gross Sq. Mtrs	0.0 0.0		100% 100%			
Adolescent Residential Treatment	0	# of Beds	0.0		100%			
Substance Abuse Transitional	0	Dept. Gross Sq. Mtrs # of Beds	0.0		100% 100%			
Care	U	Dept. Gross Sq. Mtrs			100%			
Total SANAC - Building Gro	ss Square M	eters	0	0	100%			
Additional Services - Non-IHS	•			-				
Elder Care								
Nursing Home	0	# of patient beds	0.0		100%			
		Bldg. Gross Sq. Mtrs.			100%			
Assisted Living	0	# of patient beds	0.0		100%			
The section		Bldg. Gross Sq. Mtrs.			100%			
Hospice	0	# of patient beds	0.0		100%			
Senior Citizen Center		Bldg. Gross Sq. Mtrs. # of FTE	0.0		100% 100%			
Geriioi Gilizeri Gerilei			0.0					
			0.0		100%			
Outreach Elder Care		Bldg. Gross Sq. Mtrs.			100%			
Outreach Elder Care		Bldg. Gross Sq. Mtrs. # of FTE	0.0		100%			
	0	Bldg. Gross Sq. Mtrs.	0.0			5	\$0	\$0
Outreach Elder Care Home Health Care	0	Bldg. Gross Sq. Mtrs. # of FTE Bldg. Gross Sq. Mtrs. # of Home Health	0.0 0.0 0.0		100% 100%	5	\$0	\$0
	0	Bldg. Gross Sq. Mtrs. # of FTE Bldg. Gross Sq. Mtrs. # of Home Health Care FTE	0.0 0.0 0.0	0	100% 100% 100%	5	\$0	\$0
Home Health Care		Bldg. Gross Sq. Mtrs. # of FTE Bldg. Gross Sq. Mtrs. # of Home Health Care FTE Bldg. Gross Sq. Mtrs.	0.0 0.0 0.0 0.0 0	0	100% 100% 100%	5	\$0	\$0

Central Valley Indian Health, Inc. - Tachi



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Small Health Clinic SAC

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		Direct Health Care					
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need		
Miscellaneous Services							
		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
		# of FTE	0.0		100%		
		Dept. Gross Sq. Mtrs	0.0		100%		
		# of FTE	0.0		100%		
		Dept. Gross Sq. Mtrs	0.0		100%		
		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
Miscellaneous Services Bu	0	0	100%				
Grand Total - Total Building Gross Square Meters				296	21%		

Contract Health Care					
Planned Projected	Cost /	Total CH Dollars			

Contract Health	C4 OFF O44
Dollars Sub-Total	\$1,855,044
Other Expenditures -	#700 407
Contract Health	\$723,467
Inflation Adjusted	\$3,455,204
CHS \$ - Total	Ф 3,435,204